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#### Introduction

In order to comply with the requirements of CFR 1910.134 the State of Maine Respiratory Protection Standard. The following written Respiratory Protection Program has been established for the employees of the Town of North Yarmouth and applies to all town departments. Each department is required to add any necessary addendum's addressing department specific operations.

A copy of this written program will be available for review in the main office of each department as well as the Assistant Town Manager's office at Town Hall. All interested employee's or their designated representatives are welcome to view the policy during normal working hours.

#### **Permissible Practices**

In the control of those occupational diseases caused by breathing air contaminated with harmful dusts, fogs, fumes, mists, gases, smokes, sprays, or vapors, the primary objective shall be to prevent atmospheric contamination. This shall be accomplished as far as feasible by accepted engineering control measures (for example, enclosure or confinement of the operation, general and local ventilation, and substitution of less toxic materials etc.). When effective engineering controls are not feasible, or while they are being instituted, appropriate respirators shall be used pursuant to this policy.

The Town of North Yarmouth shall provide respirators when such equipment is necessary and applicable and suitable for the purpose intended.

## Responsibilities

#### Town

The Town Safety Coordinator will be responsible for the oversight, training coordination and annual review of the program/ policy. The Town Safety Coordinator is Fire Rescue Chief Gregory Payson

#### **Departments:**

- **1.** Each department is responsible for designating an individual to be in charge of creating any necessary addendum's regarding department specific tasks.
- **2.**Shall not assign any employee to a task known to require respiratory protection unless the employee has:
  - 1. Completed the medical evaluation and been cleared by the PLHCP.
    - Been fit tested according Appendix A, by a qualified provider.
    - Received proper training on this Program / Policy.
- 3. Shall maintain a record of all employees qualified to wear respirators and retain a copy of the employees annual Fit Test in their medical file at town office

#### **Employees:**

- 1. Employees will make every effort to conduct their work activities without entering areas requiring respiratory protection.
- 2. Individuals assigned to tasks requiring respiratory protection shall wear the appropriate equipment in accordance with this policy.
- 3. Employees shall clean, disinfect and properly store their respirator.
- 4. Shared respirators shall be cleaned prior to each use.
- **5.** Employees shall inspect their assigned respirator before each use, and after cleaning/disinfecting.
- **6.** Employees shall report any and all defects to the department representative (see below)
- 7. Employees shall comply with all provisions of this policy.
- 8. Each employee shall attend a respirator-training course on an annual basis.

#### **Department Coordinators**

Town Wide - Town	Fire Dept Fire Rescue
Safety Coordinator	Chief
Public Works- Director	

**Definitions:** The following definitions are important terms used in the respiratory protection standard in this section.

**Air-purifying respirator**: means a respirator with an air-purifying filter, cartridge, or canister that removes specific air contaminants by passing ambient air through the air-purifying element

**Canister or cartridge**: means a container with a filter, sorbent, or catalyst, or combination of these items, which removes specific contaminants from the air passed through the container.

**Emergency situation:** means any occurrence such as, but not limited to, equipment failure, rupture of containers, or failure of control equipment that may or does result in an uncontrolled significant release of an airborne contaminant.

**Employee exposure:** means exposure to a concentration of an airborne contaminant that would occur if the employee were not using respiratory protection.

**Filter or air purifying element:** means a component used in respirators to remove solid or liquid aerosols from the inspired air.

**Filtering face piece:** (dust mask) means a negative pressure particulate respirator with a filter as an integral part of the face piece or with the entire face piece composed of the filtering medium.

**Fit factor:** means a quantitative estimate of the fit of a particular respirator to a specific individual, and typically estimates the ratio of the concentration of a substance in ambient air to its concentration inside the respirator when worn.

**Fit test**: means the use of a protocol to qualitatively or quantitatively evaluate the fit of a respirator on an individual. (See also Qualitative fit test QLFT and Quantitative fit test QNFT.)

**High efficiency particulate air (HEPA) filter**: means a filter that is at least 99.97% efficient in removing monodisperse particles of 0.3 micrometers in diameter. The equivalent NIOSH 42 CFR 84 particulate filters are the N100, R100, and P100 filters.

**Immediately dangerous to life or health (IDLH)**: means an atmosphere that poses an immediate threat to life, would cause irreversible adverse health effects, or would impair an individual's ability to escape from a dangerous atmosphere.

**Oxygen deficient atmosphere**: means an atmosphere with an oxygen content below 19.5% by volume.

Physician or other licensed health care professional (PLHCP):means an individual whose legally permitted scope of practice (i.e., license, registration, or certification) allows him or her to independently provide, or be delegated the responsibility to provide, some or all of the health care services required by paragraph (e) of this section.

**Qualitative fit test (QLFT)** means a pass/fail fit test to assess the adequacy of respirator fit that relies on the individual's response to the test agent.

**Quantitative fit test (QNFT)** means an assessment of the adequacy of respirator fit by numerically measuring the amount of leakage into the respirator.

**Self-contained breathing apparatus (SCBA)** means an atmosphere-supplying respirator for which the breathing air source is designed to be carried by the user.

**Tight-fitting facepiece** means a respiratory inlet covering that forms a complete seal with the face.

**User seal check** means an action conducted by the respirator user to determine if the respirator is properly seated to the face. Once on the user will block the inhalation portion of the mask and take a deep breath to ensure there are not any leaks in the mask seal

**Oxygen deficient atmosphere** means an atmosphere with an oxygen content below 19.5% by volume.

Physician or other licensed health care professional (PLHCP) means an individual whose legally permitted scope of practice (i.e., license, registration, or certification) allows him or her to independently provide, or be delegated the responsibility to provide, some or all of the health care services required by paragraph (e) of this section.

**Self-contained breathing apparatus (SCBA)** means an atmosphere-supplying respirator for which the breathing air source is designed to be carried by the user.

**Tight-fitting face piece** means a respiratory inlet covering that forms a complete seal with the face.

**User seal check means** an action conducted by the respirator user to determine if the respirator is properly seated to the face. Once on the user will block the inhalation portion of the mask and breathe in; the face piece should collapse against the face with no leaks. The next step is to block the exhalation valve and exhale; the face piece should puff away from the face with no leaks detected. If either is unsuccessful the respirator must be removed, adjusted and the above steps repeated.

## **Selection**

#### General:

In accordance with CFR 1910.134, selection will be limited to NIOSH certified respirators, which must be used in compliance with the manufacturers' certification.

The town shall assign respirators based on workplace hazard evaluations, Manufacturers' recommendations for chemicals used (Safety Data Sheets), as well as workplace and user factors affecting respirator performance and reliability.

- Only respirators supplied by the Town of North Yarmouth shall be permitted for use.
- Selection shall be based on the following:
  - Oxygen concentration
  - Contaminants physical state (gas, vapor, & particulates)
  - Toxicity
  - Concentration
  - Presence of other contaminants
  - Presence of stress factors in the work area.

## IDLH atmospheres - Employees shall use the following respirators:

- All oxygen-deficient atmospheres (19.5%) shall be considered IDLH (See exception below)
- A full face piece pressure demand SCBA certified by NIOSH for a minimum service life of thirty minutes

**Public Works** (When Respirators are to be worn)

#### **Arc Welding:**

When Arc Welding use in well ventilated area with use of a N-95 particulate mask

#### **Plasma Cutting:**

When Plasma Cutting use in well ventilated area with the use of a N-95 particulate mask

#### **Disk Grinding:**

When disk grinding, use in well ventilated area with use of N-95 particulate mask.

#### **Needle Scaling:**

When needle scaling, use in well ventilated area and with use of N-95 particulate mask.

#### **Street Sweeping:**

When street sweeping, try to stay upwind and have a continued use of N-95 particulate filter mask.

#### **Sand Blasting:**

When sandblasting, use in well ventilated area and use a filter mask.

#### **Spray Painting:**

When spray painting, use in well ventilated area and use filter mask.

#### **Fire Rescue**

#### **PURPOSE:**

This respiratory protection program is designed to provide a standard operating policy for the North Yarmouth Fire Rescue. This policy is designed to insure that all firefighters engaged in emergency operations will be provided personal protection equipment to eliminate respiratory hazards. These hazards include, but are not limited to, by-products of combustion (smoke, heat, toxic gasses, and oxygen deficiency, which present a working environment that is Immediately Dangerous to Life and Health (IDLH). This policy establishes when respiratory protection shall be used and shall meet the intent of the Maine Department of Labor, Bureau of Labor Standards Respiratory Protection Standard, 29 CFR 1910.134 and amendments.

The use of Self Contained Breathing Apparatus (SCBA) shall be the worn in all IDLH atmospheres. Engineering controls, such as ventilation, may be used when the Incident Commander (IC) is able to determine, by metering, that no respiratory hazard exists. Metering must be specific and the IC must be certain that no respiratory hazard exists before respiratory protection can be removed. Ventilation during structural firefighting shall NOT be considered as a substitute for the use of respiratory protection.

#### **SCOPE AND APPLICATION:**

This program shall apply to all employees who may be or are required to wear respiratory protection during firefighting or other emergency operations where an IDLH or other respiratory hazard exists.

North Yarmouth Fire Rescue will be responsible for any required expenses resulting from the employee's participation in the respiratory protection plan.

#### **DEFINITIONS:**

**IDLH** - Immediately Dangerous to Life and Health, means an atmosphere that poses an immediate threat to life, would cause irreversible adverse health effects, or would impair an individual's ability to escape from a dangerous atmosphere. This would include structural fire, chimney fire, dumpster fires, hazardous material incidents, vehicle fires, or any other operations, which may pose a respiratory hazard.

**Rapid Intervention Team** – This team shall consist of at least two (2) firefighters in full protective clothing with SCBA, have portable radios and rescue equipment immediately available. One member shall remain outside the entry point, while the other member(s) may perform limited outside duties, designated by the IC, as long as those duties do not jeopardize the safety of the interior firefighters.

**Buddy System** – Operating in teams of two or more firefighters. Under this system, no single firefighter shall be assigned a task to perform alone in an IDLH atmosphere. Members operating under the Buddy System shall maintain voice or visual contact with the other team member(s).

**Medical Evaluation** – Shall mean the completion of the attached Medical Questionnaire forms found in Appendix C of 29 CFR 1910.134 and reviewed by a Physician or other Licensed Health care Professional (PLHCP).

**Medical Examination** – Shall mean a physical examination by a PLHCP, selected by North Yarmouth Fire Rescue.

**Fit Testing** – A test conducted on each individual who is expected to wear a respirator. The fit test will be done using the face piece selected for that individual, to insure a proper seal. Fit testing shall meet the QLFT (qualitative) or QNFT (quantitative) fit testing protocols found in Appendix B or C of 29CFR1910.134.

#### **RESPONSIBILITIES**

#### Fire Rescue Chief Gregory Payson

The Fire Chief shall have the overall responsibility of the administration of the Respiratory Protection Program including:

- ♦ Development of the Respiratory Protection Program.
- Development of policies, rules, and regulations.
- Developing and implementing a budget to administer the Respiratory Protection Program.
- Appointment of the Respirator Program Administrator.
- Determining those individuals required to participate in the program.
- Assist the program administrator in the respirator protection program.

**Program Administrator: Fire Rescue Chief Gregory Payson** 

The program administrator is responsible for administering and overseeing the respiratory protection program. The program administrator may delegate certain responsibilities and duties to other company officers. Duties of the program administrator shall include:

- Identify work areas or operations that require individuals to wear respirators.
- Select the respiratory protection options.
- Develop and implement the respiratory protection program.
- Ensure that all individuals expected to use respirators are given a medical evaluation.
- Provide a copy of the program and Job Task Analysis to the PLHCP.
- Ensure that physical exams are conducted if required by the PLHCP.
- Implement a fit testing schedule for all individuals expected to wear a respirator.
- Institute a respirator training and retraining program.
- Ensure proper storage and maintenance of respirators.
- Develop and maintain all respirator training and respirator records.
- Evaluate and update the program annually.
- Shall ensure that the compressed air maintains Grade D quality and that the air compressor is serviced at regular intervals following the manufacturer's recommendations and air tested at least annually.

#### **Company Officers**

Company Officers are responsible for ensuring that the respiratory protection program is implemented. In addition to being knowledgeable about the program requirements for their own protection, Company Officers shall ensure that the program is understood and followed by all individuals under their charge. Duties of Company Officers include:

- Ensure that individuals under their supervision have received appropriate training, fit testing, and medical evaluations according to the established schedule.
- Ensuring the availability of SCBA for all personnel working in an IDLH atmosphere.
- Enforcing the proper use of SCBA when necessary.
- ♦ Ensuring that SCBAs are properly cleaned, maintained, and stored according to the respiratory protection program.
- Continually monitoring work areas and operations to identify respiratory hazards.
- Report to the Program Administrator or Deputy Administrator any individual having difficulty wearing or when using SCBA.
- ♦ Ensure that all Personnel operating in IDLH incidents follow the Department SOG for Fire Scene rehab.

#### **Employees**

- ♦ Each employee shall wear his/her SCBA when and where required and in the manner in which they were trained.
- Each employee shall care, maintain, and store their SCBA as instructed.
- ◆ Shall inform the Company Officer if the SCBA face piece no longer fits well and request to be refitted with the proper fitting face piece.

- ♦ Inform the Company Officer should you have difficulty when wearing or using an SCBA.
- ♦ Inform the Company Officer or Program Administrator of any respiratory hazards that you feel are not adequately addressed in the workplace and any other concerns that you have regarding the program.

#### **PROGRAM ELEMENTS**

#### **Selection of Respirator Procedures**

North Yarmouth Fire Rescue currently uses Scott model AP 75 of SCBA. The Scott Air pack is certified by NIOSH and shall be used in accordance with the certification. Personnel shall be fit tested annually. Should the individual require a different mask then the standard, the Department shall issue to the individual member the proper fitting mask. The Department uses the Scott Model AV 3000 Mask

#### HAZARD EVALUATION WHERE SCBA WILL BE REQUIRED

#### **Structural Firefighting**

Due to the unknown respiratory hazards posed by structural firefighting, all members of North Yarmouth Fire Rescue engaged in interior structural firefighting (as defined in the definition section of this program) shall use SCBAs. The SCBA shall remain in use until overhaul is complete and the fire is determined to be out by the Incident Commander, or the respiratory hazard has been eliminated and deemed safe by the use of meters.

Firefighters who are performing exterior operations at a structural fire may be required to use SCBA, depending on the operation and the potential respiratory hazard as determined by the Incident Commander, Safety Officer, or Company Officer.

Each and every firefighter using SCBA shall be required to go through Fire Scene Rehab, after two air cylinders are used, and prior to reentering the structure. Firefighters must complete all aspects of rehab, as written in the Rehab. SOG. On scene medical personnel (if available) have the final approval before a firefighter can return to the IDLH atmosphere.

#### **Vehicle Fires**

Vehicle fires are known to produce toxic gasses that may be IDLH. Firefighters who are engaged in vehicle firefighting operations shall use SCBA while performing this operation.

#### **Dumpster Fires or Trash Container Fires**

These fires (if not classified as a structure fire) when involved in a fire, shall require firefighters to wear SCBA while performing these operations.

#### **Hazardous Materials Incidents**

Firefighters who respond to or operate at a hazardous materials incident may be exposed to a variety of known and unknown respiratory hazards. SCBA shall be worn by all personnel operating in the Hot Zone, Warm Zone, and Decontamination Zone as determined by the Incident Commander.

#### **Chimney Fires**

Firefighters operating at the chimney shall be required to wear SCBAs.

#### **Carbon Monoxide Incidents**

Due to the fact that carbon monoxide presents a potential respiratory hazard, personnel operating at CO Alarms shall wear SCBA until the structure has been declared safe and by verifying with a Carbon Monoxide Meter.

#### **Special Rescue Situations**

Special rescue situations may include below grade, confined space, and other areas where the Incident Commander cannot ensure the quality of the atmosphere. In these cases personnel shall be required to wear SCBA. Engineering controls such as ventilation may be used with constant monitoring and may ensure with certainty the quality of the atmosphere in the rescue environment.

#### Other Respiratory Hazards

Nothing in this policy is intended to restrict the Incident Commander, Safety Officer, or Company Officer from requiring personnel to use SCBA when he/she suspects a potential respiratory hazard. Officers are encouraged to adequately size up the situation and consider the safety of personnel when making decisions regarding SCBA. When in doubt, order SCBAs to be worn.

#### **UPDATING THE HAZARD ASSESSMENT**

The Program Administrator shall review and update the hazard assessment annually or as needed.

#### **MEDICAL EVALUATION**

Personnel who may be subject to or required to wear SCBA must pass a medical evaluation before being permitted to wear SCBA in training or on the job. Personnel are not permitted to wear SCBA until a PLHCP has determined that they are medically able to do so. Any personnel refusing a medical evaluation will not be allowed to work in an area requiring SCBA.

A PLHCP at Bayside Employee Health (Portland Office) will provide the medical evaluation. Medical evaluation procedures are as follows:

- ◆ The medical evaluation will be conducted using a questionnaire provided in Appendix C of the respiratory protection standard 29CFR1910.134.
- All employees will go through the following annual assessments based on job function.
  - Interior Firefighters and EMT's shall go through the following exam
    - Preplacement / Physical: Height, weight, BP, vitals, Physical Exam
    - Pulmonary Function Test: Respiratory Clearance
    - ♦ PPD Test: Tuberculin Skin Test
    - ♦ BTE (Lift): 75lb lift to waist, 35lb to shoulder, 25lb lift to overhead
    - ♦ Fit Test for N-95
  - Exterior Firefighters, Drivers, and Fire Police shall go through the following exam
    - Preplacement / Physical: Height, weight, BP, vitals, head to toe exam
    - ♦ Pulmonary Function Test: Respiratory Clearance
    - ♦ PPD Test: Tuberculin Skin Test
    - ♦ BTE (Lift): 50lb lift to waist, 35lb to shoulder, 25lb lift to overhead
    - ♦ Fit Test for N-95
- To the extent feasible, North Yarmouth Fire Rescue will assist employees who are unable to read the questionnaire (by providing help in reading the questionnaire).
   When this is not possible, the employee will be sent directly to the PLHCP for medical evaluation.
- All affected employees will be given a copy of the medical questionnaire to fill out, along with a stamped and addressed envelope for mailing the questionnaire to the Department PLHCP. Employees will be permitted to fill out the questionnaire on employer time.
- Follow-up medical evaluations will be provided to employees as required by this standard, or as required by the PLHCP.
- ♦ All employees shall be granted the opportunity to speak with the physician about their medical evaluation, if they so request.
- ♦ After an employee has received clearance and begun to wear SCBA, additional medical evaluations will be provided under the following circumstances.

Each employee shall have their respiratory clearance performed annually

#### Or:

- The employee reports signs and/or symptoms related to their ability to use an SCBA, such as shortness of breath, dizziness, chest pains, or wheezing.
- The PLHCP or supervisor informs the Program Administrator that the employee needs to be reevaluated.
- Information from the program, including observations made during fit testing and program evaluation, indicates a need for reevaluation.
- A change occurs in the workplace that may result in an increased physiological burden on the employee.

All examinations, evaluations and questionnaires are to remain confidential between the employee and the PLHCP.

#### **FIT TESTING**

Fit testing is required for all employees wearing SCBA.

Fit testing will be conducted in accordance with the following schedule:

- Prior to being allowed to wear SCBA.
- ♦ Annually
- ♦ When there are changes in the employee's physical condition that could affect respiratory fit (obvious changes in body weight, facial scarring, etc.).

Employees will be fit tested with the specific make, model, and size SCBA that they will actually use.

The Program Administrator will conduct fit tests following the QLFT or QNFT protocols found in Appendix B or C of the respiratory protection standard.

#### **RESPIRATORY USE**

SCBA use is required for all employees engaged in the following firefighting activities: structural fires, hazardous materials incidents, vehicle fires, dumpster fires, and special rescue situations, or any incident which may cause exposure to a respiratory hazard.

#### General Procedures

Employees will use their SCBAs under conditions specified by this program, and accordance with the training they receive on the use of each particular model. In addition, the SCBA shall not be used in a manner for which it was not certified by NIOSH or by its manufacturer.

All employees shall conduct "User Seal Checks" each time that they wear their respirator. Employees shall use either positive or negative pressure check as specified in Appendix B-1 of the Respiratory Protection Standard.

Employees who detect operational problems with, or experience failure of, the SCBA shall immediately notify their supervisor, sound their PASS Alarm, and leave the hazardous environment with their company

Employees are not permitted to wear any jewelry, ear protection, eyeglasses, or protective hoods in a manner that may interfere with the face to face piece seal. Facial hair or any other hairstyle may not interfere with the face to face piece seal.

Interior Structural Firefighting

Employees engaged in Interior Structural Firefighting shall:

- Use SCBA for all fires beyond the Incipient Stage or as directed by the Incident Commander.
- ◆ Continue to use SCBA until the completion of "Overhaul".
- Work in a minimum of pairs and maintain voice or visual contact with members of each team.
- Be supported by two stand-by members who are available for immediate rescue of interior firefighters, at each point of entry as determined by the Incident Commander. Each stand-by member shall be dressed in full protective clothing and have SCBA immediately available to them. The function of one of the stand-by members shall be accountability of the firefighters inside the structure. The other stand-by member may assume other duties including Incident Commander or Pump Operator provided this individual is able to perform rescue assistance without jeopardizing the safety or health of any firefighter working at the incident.

Nothing herein shall prohibit the Incident Commander from establishing a Rapid Intervention Team (RIT) to replace the two firefighters outside, provided a RIT Team is established for each entry point as determined by the Incident Commander.

In the event that the Incident Commander determines the need to perform Emergency Rescue Activities prior to the arrival of the entire team, the Incident Commander <u>must:</u>

- Notify dispatch of entry without the two stand-by members.
- ♦ Enter with or without a charged handline, perform the Emergency rescue, and immediately leave the structure.
- ♦ After the incident, document in writing, to the Fire Chief, a detailed explanation regarding the deviation of policy.

Use other than Interior Structural Firefighting

For incidents requiring SCBA use other than Interior Structural Firefighting, employees shall use SCBA whenever they may be exposed to environments which may become IDLH or other respiratory hazard, as directed by the Incident Commander.

When the Incident Commander cannot ensure the employees ability to escape from the hazardous environment, one employee shall be stationed at the point of entry to maintain accountability and be readily available to perform immediate rescue.

#### **AIR QUALITY**

SCBA cylinders shall be filled with Grade D compressed air only. The Program Administrator shall ensure that the compressed air maintains Grade D quality and that the air compressor is serviced following the manufacturer's recommendations and air tested at least annually.

#### **CLEANING**

SCBA are to be cleaned and disinfected after each use following the manufacturer's recommendations or as follows:

- ♦ Disassemble SCBA, removing cylinder, mask and PASS device (if possible).
- Wash the face piece and associated parts in mild detergent with warm water.
- Disinfect the face piece with a diluted bleach solution.
- ♦ Rinse completely in clean warm water.
- ♦ Air-dry in a clean area.
- ♦ Reassemble the SCBA, test the function, and replace any defective parts, test function.
- ♦ **Secured** back on the apparatus, masks are to be stored in a bag, or within an enclosed cab.

Field cleaning of SCBA is to be done using 70% Isopropyl Alcohol wipes. There will be no sharing of SCBA masks in the field without proper field cleaning.

The Program Administrator will ensure an adequate supply of cleaning and disinfecting material at the fire station, as well as field cleaning material. If supplies are low, employees should notify their supervisor who will in turn notify the Program Administrator.

#### **MAINTENANCE**

SCBA are to be properly maintained at all times in order to ensure that they function properly and adequately protect the employees. Maintenance involves a thorough visual inspection for cleanliness and defects. Worn or deteriorated parts will be replaced prior to use. No components will be replaced or repairs made beyond those recommended by the manufacturer, except by those trained by the manufacturer to do such repairs. Repairs beyond the scope of our trained personnel will be conducted by the manufacturer or their designee.

The following items are to be checked after each use and weekly/monthly. The findings of these checks are to be properly recorded in the SCBA Maintenance Log:

Face piece;
 Cracks, tears, or holes

#### **MAINTENANCE** Continued

Distorted face piece Cracked, loose, or damaged lens Clean condition

Head straps;

Breaks or tears Broken buckles

Valves

Residue or dirt Damage to valve or valve material

Gauges, regulators & Air Lines
 Damage to or inaccuracy
 Leaks

♦ PASS Alarm

Operation

Battery condition

♦ Body Harness

Tears, rips, fraying or otherwise damaged straps Broken buckles

♦ Cylinder

Air supply full (at least 90% capacity) Hydrostatic test date General cylinder condition

SCBA that are defective or that have defective parts shall be taken out of service immediately. If during an inspection or during use, an employee discovers an SCBA with a defect he / she is to bring the defect to the attention of his / her supervisor. Supervisors will give all defective SCBA to the Program Administrator. The Program Administrator will decide whether to:

- ◆ Temporarily take the SCBA out of service until it can be repaired
- ♦ Perform a simple repair on the spot.
- Dispose of the SCBA or part due to irreparable condition.

When a respirator is taken out of service, it will be appropriately tagged indicating the problems, and stored in the SCBA maintenance room until it can be repaired or sent out for service.

#### **OVERHAUL FREQUENCY**

The SCBA shall have overhaul maintenance performed at regular intervals following the Manufacturer's recommendations.

#### **STORAGE**

SCBA shall be **secured** in their designated place on the apparatus. Masks shall be stored in plastic or nylon bags, or enclosed apparatus cabs to prevent exposure to road dirt or other contaminates.

#### **TRAINING**

Annually, in North Yarmouth Fire Rescue, each employee shall attend and successfully complete SCBA training that is based on current NFPA Standards. Training will be both knowledge and hands-on based. Training will include a review of the written Respiratory Protection Plan including:

- ♦ The need for respirator use, and how improper fit, usage, or maintenance can compromise the protective effectiveness of the SCBA.
- Limitations and capabilities of SCBA
- ♦ How to effectively use SCBA
- ♦ How to inspect, Don, Doff, use, and perform proper seal checks.
- Procedures for maintenance field cleaning, and storage.
- How to recognize medical symptoms that may compromise the safety of the wearer.

#### **PROGRAM EVALUATION**

The Program Administrator shall annually and as needed re-evaluate the respiratory program to ensure that:

- Current written programs are being effective and properly implemented.
- ♦ Employees are properly using SCBA and,
- The program continues to be effective.

#### **RECORDKEEPING**

The Program Administrator shall keep and maintain all documentation in the areas of:

- Medical evaluations (PLHCP recommendation only)
- Fit testing records
- ♦ Training records
- ♦ Overhaul/Flow test records
- ♦ Weekly/monthly inspections
- ◆ Compressor service records (if applicable)

#### N-95 Masks - COVID-19

1. **Program Administrator**. Chief Gregory Payson has been designated as the Program Administrator and is responsible for implementing and evaluating all aspects of this program. This does not prohibit the administrator from relying on other employees to help manage parts of the respiratory protection program (e.g., fit testing, medical evaluations, etc.). Due to the various types of N-95 respirators on the market, the Program Administrator must select a respirator that is approved by the manufacturer for TB.

- 2. **General Provision**. Employees who are required to wear respirators will be provided respirators, training, and medical evaluations at no cost to the employees involved.
- 3. Medical evaluations of employees required to wear respirators.
- a. Using a respirator may place a physical burden on an employee's health. The burden varies according to a number of factors, such as the weight and breathing resistance of the respirator and the workplace conditions under which the respirator is worn. Additionally, some medical conditions may place an employee at increased risk of illness, injury, or death.
- b. All employees must complete an initial and then a periodic evaluation, based on their age, to determine their fitness to wear the N-95. A qualified Physician or other Licensed Health Care Professional (PLHCP) must review these evaluations. Results of these evaluations must be provided to the employee and kept on file for 5 years. (A PLHCP's may use their own survey questionnaire or the sample survey questionnaire provided at Appendix A.)
  - c. Periodic medical evaluations shall be administered according to the following schedule:
    - Employees: Annually no matter age

d. Employees who are not medically evaluated and/or cleared for use of a respirator will not be permitted to perform a task requiring respiratory protector.

#### 4. Fit testing procedures.

- a. Fit testing must be conducted for all employees prior to initial use. Fit testing is a procedure used to determine how well a respirator "fits", that is, whether the respirator forms a seal on the user's face. If a good face piece-to-face seal is not achieved, the respirator will provide a lower level of protection than it was designed to provide.
- b. Fit testing cannot be conducted until after a Physician or Licensed Health Care Provider (PLHCP) has reviewed the medical evaluation and provided, in writing, a determination the employee can use a respirator.
- c. Fit testing will be conducted annually using either a Qualitative Fit Test (QLFT) or a Quantitative Fit Test (QNFT). Fit testing will also be accomplished whenever there are changes in the employee's physical condition that could affect respiratory fit (obvious changes in body weight, facial scarring, etc.).
  - d. Appendix B outlines the procedures for donning and adjusting the N-95 respirator.

#### 4. Hazard Evaluation where N-95 Masks will be required:

- N-95 respirators will be used whenever transporting patients from scene to medical facilities whenever in contact with a patient known or suspected of having TB.
- N-95 respirators will be used whenever the patient has been identified with a positive U-21 or inconclusive U-21 status.
- N-95 respirators will be used whenever the patient is exhibiting the following signs and symptoms under COVID-19 Protocols:

- o Fever or chills
- Cough
- o Shortness of Breath or difficulty breathing.
- Fatigue
- Body Aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- o Diarrhea
- Exposure to a laboratory confirmed COVID-19 patient within the past 14 days
- 6. **Recordkeeping**. An employee medical evaluation, fit testing and training will be kept on file.
- 7. Procedures and schedules for cleaning, disinfecting, storing, inspecting, repairing, discarding, and maintaining respirators.

#### Inspection.

N-95 respirators will be visually inspected prior to use to ensure no parts are missing, distorted, blocked, loose, deteriorated, or otherwise interfere with proper performance. Respirators not passing inspection must be discarded.

#### Maintenance.

- (1) Soiled mask should be replaced but not cleaned.
- (2) Always thoroughly wash hands after removing taking the mask off.
- (3) After use, the mask should be wrapped in a plastic bag before disposal.
- (4) Never share mask with others.
- (5) When breathing becomes difficult, replace the mask

#### **STORAGE**

Respirators must be stored in a manner that:

- (1) Protects them from contamination, dust, sunlight, extreme temperatures, excessive moisture, damaging chemicals, or other destructive conditions.
- (2) Prevents the face piece from becoming deformed.
- (3) Follows all storage precautions issued by the respiratory manufacturer.

#### 8. TRAINING

Training must be provided to all employees required to wear respirators and annotated on a training attendance roster. (Sample at Appendix C.). New employees will receive training prior to being exposed to any hazards and all employees will receive training on an annual basis. Training must include:

a. Why the respirator is necessary and how improper fit, usage, and maintenance can make the respirator ineffective.

- b. What the limitations and capabilities of the selected respirator are.
- c. How to use the respirator effectively.
- d. How to inspect, put on and remove, and check the seals of the respirator.
- e. What the respirator maintenance and storage procedures are.
- f. How to recognize medical signs and symptoms that may limit or prevent effective use of the respirator.
- g. The general requirements of this Respiratory Program.



## **Qualitative Respirator Fit Test Record**

Company Name: N	orth Yarmou	th Fire Rescu	e Location: 4	63 Walnut	Hill Rd, North Yarmouth	
Employee Data:						
Name:			ID #:			
Department:		Job Title:				
Prescription Glasses R	equired: 🔾 Y	'es ○ No Doe	es Facial Hair Interfere v	with Seal:	Yes No	
Other PPE Worn:						
Respirator Data:						
Model: Envo - N-95			Гуре of Face piece:	⊃ Half Fac	e O Full Face	
	ze: OS OM OL One Size NIOSH Approval No.: Filter: 39802 Mask: 48016					
		Tr	raining	<u></u>		
and symptoms the	at may limit rotection pro	respirator use; vided by the r	of the respirator; how how improper fit, use espirator; how to prop or positive and negati	e, cleaning perly put on	and storage can and take off the	
Fit Test:						
Fit Test Solution:	Saccharing	n O Bitrex	Sensitivity Test:	O Pass	<b>F</b> ail	
No. of Nebulizer Squ	ueezes to Ta	aste Threshold	I (T) (10, 20, 30)			
Fit Test:						
Normal Breathing	<ul><li>Pass</li></ul>	Fail	Talking	<ul><li>Pass</li></ul>	○ Fail	
Deep Breathing	Pass	Fail	Bend Over/Jog	Pass	Fail	
Head Side to Side	Pass	Fail	Normal Breathing	Pass	○ Fail	
Head Up and Down	Pass	Fail	Overall Fit Test	Pass	○ Fail	
Fit Test Performed	Ву:					
Employee Signature	:			Date:		

## **EFFECTIVE DATES**

The effective date of this policy shall be 12/19/2014	Signature
This policy was updated on 07/07/2015	Signature
Next scheduled evaluation of this policy shall be 12/19/2015	Signature
Next scheduled evaluation of this policy shall be 12/19/2016	Signature
Next scheduled evaluation of this policy shall be 12/19/2017	Signature
Next scheduled evaluation of this policy shall be 12/19/2018	Signature
Next scheduled evaluation of this policy shall be 12/19/2019	Signature
Next scheduled evaluation of this policy shall be 12/19/2020	Signature_
Next scheduled evaluation of this policy shall be 12/19/2020	Signature
This policy was updated on 01/01/2021	Signature
Next scheduled evaluation of this policy shall be 12/19/2022	Signature
Next scheduled evaluation of this policy shall be 12/19/2023	Signature
Next scheduled evaluation of this policy shall be 12/19/2024	Signature
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Next scheduled evaluation of this policy shall be 12/19/2025	Signature
Next scheduled evaluation of this policy shall be 12/19/2026	Signature
Next scheduled evaluation of this policy shall be 12/19/2027	Signature
Next scheduled evaluation of this policy shall be 12/19/2028	Signature
Next scheduled evaluation of this policy shall be 12/19/2029	Signature
Next scheduled evaluation of this policy shall be 12/19/2030	Signature